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| Fill in this information to identify your | case: | |
|---|---|------------------------------------|
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this i amended filin |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Your full name Write the name that is on your Kyle government-issued picture First Name First Name identification (for example, your driver's license or Middle Name Middle Name passport). Steele Last Name Bring your picture Last Name identification to your meeting with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) All other names you have used in the last 8 First Name First Name years Middle Name Middle Name Include your married or maiden names. Last Name Last Name Only the last 4 digits of xxx - xx - 1 4 3 3your Social Security number or federal OR OR Individual Taxpayer Identification number 9xx - xx -9xx - xx -(ITIN) Any business names I have not used any business names or EINs. ☐ I have not used any business names or EINs. and Employer **Identification Numbers** Business name Business name (EIN) you have used in the last 8 years Business name Business name Include trade names and doing business as names Business name Business name

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| Del | btor 1 | Kyle First Name | | teele ast Name | | Case nu | mber (if known) | | |
|-----|---------|-----------------------------|---|-------------------|--|--------------------|--|---|--------------|
| | | ristrante | About Debtor 1: | Strame | | Abo | out Debtor 2 (S | pouse Only in a Joint | Case): |
| | | | | <u> </u> | | EIN | | | |
| | | | | | | - EIN | | | |
| 5. | Where | you live | | | | If D | ebtor 2 lives at | t a different address: | |
| | | | 3517 Gracy Rd. | | | | | | |
| | | | Number Street | | | Nun | nber Street | | |
| | | | | | | | | | |
| | | | McHenry City | IL State | 60050 ZIP Code | | | State ZIP Code | |
| | | | McHenry | State | ZIP Code | City | | State ZIP Code | |
| | | | County | | | Cou | inty | | |
| | | | If your mailing ad the one above, fil court will send any mailing address. | . Note that the | froi will | m yours, fill it i | ng address is different n here. Note that the co es to you at this mailing | | |
| | | | PO BOX 2340 | | | | | | |
| | | | Number Street | | | Nun | nber Street | | |
| | | | P.O. Box | | | | . Box | | |
| | | | CRYSTAL LAKE | E IL | 60039 | | | | |
| | | | City | State | ZIP Code | City | | State ZIP Code | |
| 6. | | ou are choosing | Check one: | | | Che | eck one: | | |
| | bankru | | انت ا | e lived in t | before filing this this district longer t. | | | 180 days before filing the lived in this district lor her district. | |
| | | | I have anothe (See 28 U.S. | | | | I have anothe (See 28 U.S.C | r reason. Explain. C. § 1408.) | |
| P | art 2: | Tell the Cour | t About Your Bankru | ptcy Ca | se | | | | |
| 7. | Bankru | apter of the iptcy Code you | Check one: (For a b | | • | | | S.C. § 342(b) for Individation | duals Filing |
| | are cho | oosing to file | Chapter 7 | | | | | | |
| | | | ☐ Chapter 11 | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | ✓ Chapter 13 | | | | | | |

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| Deb | otor 1 Kyle | Steele | | Case number (if known) | | | | |
|-----|---|------------------------|--|--|--|--------------------------------------|-------------------------------|--|
| | First Name | Middle Name | Last Name | | ` , - | | | |
| 8. | How you will pay the fee | court pay v | I pay the entire fee when I file my petition t for more details about how you may pay. with cash, cashier's check, or money order llf, your attorney may pay with a credit car | . Typicall er. If your | ly, if you are pay attorney is subr | ing the fee your mitting your pay | self, you may | |
| | | | ed to pay the fee in installments. If you iduals to Pay Your Filing Fee in Installme | | | and attach the A | application for | |
| | | By la than fee i | uest that my fee be waived (You may reaw, a judge may, but is not required to, wa 150% of the official poverty line that apple in installments). If you choose this option, g Fee Waived (Official Form 103B) and file | ive your t lies to you , you mus | fee, and may do ur family size and at fill out the App | so only if your i d you are unabl | ncome is less e to pay the | |
| 9. | Have you filed for | □ No | | | | | | |
| | bankruptcy within the last 8 years? | ☑ Yes. | | | | | | |
| | | District N | Iorthern District of Illinois | _ | 12/12/2013 MM / DD / YYYY | Case number | 13-47493 | |
| | | District _ | | _ When | MM / DD / YYYY | Case number | | |
| | | District _ | | When | | Case number | | |
| 10. | Are any bankruptcy | ☑ No | | | | | | |
| | cases pending or being filed by a spouse who is | Yes. | | | | | | |
| | not filing this case with you, or by a business | Debtor _ | | | Relationsh | ip to you | | |
| | partner, or by an affiliate? | District _ | | _ When | MM / DD / YYYY | Case number, if known | | |
| | | Debtor _ | | | Relationsh | ip to you | | |
| | | District _ | | _ When | MM / DD / YYYY | Case number, if known | | |
| 11. | Do you rent your residence? | ✓ No. ☐ Yes. | Go to line 12. Has your landlord obtained an eviction residence? | judgment | t against you and | d do you want to | stay in your | |
| | | | No. Go to line 12. Yes. Fill out Initial Statement Abor | | ction Judgment | Against You (Fo | orm 101A) | |

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| Deb | otor 1 | Kyle First Name | Middle N | ame | Steele Last Name | Case number (if | f known) | | |
|-----------------------------|--|---|------------------|------------------------------|--|--|---------------------------|-------------------------------------|------------------------|
| P | art 3: | Report About A | Any Βι | ısine | sses You Own as a | a Sole Proprietor | | | |
| 12. | of any fi busines A sole p busines individu | re you a sole proprietor any full- or part-time usiness? sole proprietorship is a disiness you operate as an dividual, and is not a eparate legal entity such as corporation, partnership, or .C. | | | Go to Part 4. Name and location of b Name of business, if any Number Street | usiness | | | |
| | • | | | | | | | | |
| | sole pro | ave more than one oprietorship, use a e sheet and attach it detition | | | City Check the appropriate | box to describe your business: | State | ZIP Cod | le |
| | to tilis p | euton. | | | Single Asset Rea Stockbroker (as of | ness (as defined in 11 U.S.C. § all Estate (as defined in 11 U.S.C. defined in 11 U.S.C. § 101(53A)) er (as defined in 11 U.S.C. § 101 e | . § 101(51B)) | | |
| Chapte Bankru are you | I filing under r 11 of the ptcy Code and a small business | can mos | set ap t rece | opropriate deadlines. If you | the court must know whether yo you indicate that you are a small nent of operations, cash-flow star of exist, follow the procedure in 1 | l business deb tement, and fe | otor, you r ederal inc | must attach your come tax return | |
| | debtor | lebtor? | | No. | I am not filing under C | hapter 11. | | | |
| | | efinition of small as debtor, see | | No. | I am filing under Chap the Bankruptcy Code. | ter 11, but I am NOT a small bus | siness debtor a | according | g to the definition in |
| | 11 U.S. | C. § 101(51D). | | Yes. | I am filing under Chap Bankruptcy Code. | ter 11 and I am a small business | s debtor accor | ding to th | e definition in the |
| P | art 4: | Report If You C | Own or | Hav | e Any Hazardous I | Property or Any Property | That Need | ls Imme | ediate Attention |
| 14. | propert alleged immine | own or have any y that poses or is to pose a threat of nt and identifiable to public health or | | No Yes. | What is the hazard? | | | | |
| | safety? any pro | Or do you own operty that needs attention? | | | If immediate attention | is needed, why is it needed? | | | |
| | perisha livestoc | mple, do you own ble goods, or k that must be fed, or ng that needs urgent | | | Where is the property? | Number Street | | | |
| | | | | | | City | <u> </u> | State | ZIP Code |

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Debtor 1 Kyle Steele Case number (if known) ______

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

About Debtor 1:

 Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. You must check one:

☑ I received a briefing from an approved credit
counseling agency within the 180 days before I

I received a briefing from an approved credit counseling agency within the 180 days before filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| | I am not required to rece | ive a | briefing | abou |
|---|---------------------------|-------|----------|------|
| _ | credit counseling because | se of | : | |

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making

rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not | requi | red to | receiv | ve a | briefi | ng a | bout |
|----------|--------|---------|--------|-------|--------|------|------|
| credit c | ounsel | ling be | cause | e of: | | | |

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Deb | otor 1 | Kyle First Name | Middle Na | Steele ame Last Name | | Case number (if | known) | | |
|-----|--------------------|--|-----------|--|----------|--|------------|--|--|
| P | art 6: | Answer These | Questi | ons for Reporting P | urpos | ses | | | |
| 16. | What k | ind of debts do you | 16a. | • | idual pi | ssumer debts? Consumer de rimarily for a personal, family, | | defined in 11 U.S.C. § 101(8) ehold purpose." | |
| | | | 16b. | | r invest | siness debts? Business debt tment or through the operation | | ebts that you incurred to obtain ousiness or investment. | |
| | | | 16c. | State the type of debts | you ow | e that are not consumer or bu | siness d | lebts. | |
| 17. | Are yo | u filing under er 7? | | No. I am not filing unde | er Char | oter 7. Go to line 18. | | | |
| | | estimate that after empt property is | | | | | | | |
| | are pai availat | ed and strative expenses d that funds will be ble for distribution ecured creditors? | | □ No □ Yes | | | | | |
| 18. | | any creditors do timate that you | | 1-49 50-99 100-199 200-999 | | 1,000-5,000 5,001-10,000 10,001-25,000 | <u></u> 5 | 5,001-50,000 0,001-100,000 More than 100,000 | |
| 19. | | uch do you te your assets to th? | | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$ \$ | 500,000,001-\$1 billion 51,000,000,001-\$10 billion 510,000,000,001-\$50 billion More than \$50 billion | |
| 20. | | uch do you te your liabilities to | | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$ \$ | 500,000,001-\$1 billion 51,000,000,001-\$10 billion 510,000,000,001-\$50 billion More than \$50 billion | |
| P | art 7: | Sign Below | | | | | | | |
| For | you | | | e examined this petition, correct. | and I d | eclare under penalty of perjur | y that the | e information provided is true | |
| | | | or 13 | | | | | eligible, under Chapter 7, 11, 12, er each chapter, and I choose to | |
| | | | | | | d not pay or agree to pay some d and read the notice required | | o is not an attorney to help me .S.C. § 342(b). | |
| | | | I req | uest relief in accordance | with the | e chapter of title 11, United Sta | ates Cod | de, specified in this petition. | |
| | | | conn | - | case ca | • | - | noney or property by fraud in prisonment for up to 20 years, | |
| | | | _ | s/ Kyle Steele | | x | | | |
| | | | | yle Steele, Debtor 1 | | Signat | ure of D | ebtor 2 | |
| | | | Е | xecuted on <u>05/20/2016</u> MM / DD / YY | ΥΥ | Execu | | MM / DD / YYYY | |

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| Debtor 1 | Kyle | | Steele | Case number (if know | vn) | | | | |
|---|------------|--|---|---------------------------|--------------------------------|--|--|--|--|
| | First Name | Middle Name | Last Name | <u> </u> | | | | | |
| For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page. | | I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. | | | | | | | |
| | | | rt J. Adams & Associa of Attorney for Debtor | ntes Date | • 05/20/2016 MM / DD / YYYY | | | | |
| | | Robert J | . Adams & Associates | S | | | | | |
| | | Printed na | | | | | | | |
| | | Robert J Firm Name | . Adams & Associates | 3 | | | | | |
| | | | ackson, Suite 202 | | | | | | |
| | | Number | Street | | | | | | |
| | | | | | | | | | |
| | | Chicago | | <u> </u> | 60603 | | | | |
| | | City | | State | ZIP Code | | | | |
| | | Contact ph | none (312) 346-0100 | Email address bank | ruptcy713@yahoo.com | | | | |
| | | 0013056 | | | | | | | |
| | | Bar numbe | er | State | _ | | | | |

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| F | ill in this info | ormation to ide | ntify your | case and | this filing: | | |
|---------------------|--|--|---|---|--|---|---------------------------------------|
| De | ebtor 1 | Kyle | | ; | Steele | | |
| | | First Name | Middle Nar | me I | Last Name | | |
| | ebtor 2 Spouse, if filing) | First Name | Middle Nar | me I | Last Name | | |
| l | nited States Bar | kruptcy Court for th | a. NORTH | EDN DISTR | RICT OF ILLINOIS | | |
| | | ikrupicy Court for th | e. <u>NOKTH</u> | EKN DISTR | MCT OF ILLINOIS | | |
| | ase number known) | | | | | _ | if this is an ed filing |
| | | | | | | | |
| Of | ficial Form | 106A/B | | | | | |
| Sc | hedule A/ | B: Property | | | | | 12/15 |
| _ | nicacio 7V | D. I Topolty | | | | | 12/10 |
| the filin she | asset in the ca ng together, bot eet to this form. | tegory where you the degree where the degree where the degree of the top of any t | hink it fits onsible for additional | best. Be as supplying co pages, write | asset only once. If an ass complete and accurate as porrect information. If more your name and case numbers are described. | possible. If two married pe space is needed, attach a s er (if known). Answer eve | ople are separate ry question. |
| P | art 1: Des | scribe Each Res | sidence, E | sullaing, L | and, or Other Real Es | tate You Own or Have | an interest in |
| 1. | Do you own o | r have any legal o | equitable i | interest in ar | ny residence, building, land | l, or similar property? | |
| | ✓ No. Go to | Part 2. | | | | | |
| | Yes. Who | ere is the property? | | | | | |
| 2. | | • | - | - | ur entries from Part 1, incluat number here | _ | \$0.00 |
| P | art 2: Des | scribe Your Veh | icles | | | • | |
| | own that some | | ou lease a v | rehicle, also r | vehicles, whether they are report it on Schedule G: Executed Execute E | _ | • |
| | □ No ✓ Yes | | | | | | |
| 3.1. | | Food Food | | | terest in the property? | Do not deduct secured clair | • |
| Mak | | Ford Escort | | neck one. Debtor 1 or | nly | amount of any secured clair Creditors Who Have Claim | |
| Mod | | Escort | [✓ | Debtor 7 or Debtor 2 or | • | Current value of the | Current value of the |
| Yea | | 1997 | | • | nd Debtor 2 only | entire property? | portion you own? |
| | proximate mileaç | je: <u>147,000</u> | _ 🗆 | At least one | e of the debtors and another | \$750.00 | \$750.00 |
| | er information: | 4 | _ | . Chaol: if th | ia la aamamanultu muamantu | | |
| 198 | 7 Ford Escor | τ | L | (see instruc | is is community property ctions) | | |
| 3.2. | | | WI | ho has an in | terest in the property? | Do not deduct secured clair | ms or exemptions. Put the |
| Mak | ke: | Dodge | Cr | neck one. | | amount of any secured clai | |
| Mod | del: | Stratus | | | • | Creditors Who Have Claim | |
| Yea | ır: | 2005 | | Debtor 2 or | • | Current value of the entire property? | Current value of the portion you own? |
| App | proximate mileaç | je: 155,000 | _ | • | nd Debtor 2 only e of the debtors and another | \$2,500.00 | \$2,500.00 |
| Oth | er information: | | | 1 | | Ψ2,500.00 | Ψ2,300.00 |
| 200 | 5 DODGE ST | RATUS | | Check if the (see instruc | is is community property ctions) | | |
| 4. | | | | | eational vehicles, other vehing vessels, snowmobiles, m | | |
| | ✓ No ☐ Yes | | | | | | |

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| Deb | otor 1 | Kyle First Name | Middle Name | Steele Last Name | | Case number (if known) | |
|-----|---------------------------|---|--------------------------------------|---|------------------|---|---|
| 5. | | | | n for all of your entrient rt 2. Write that numb | | including any | → \$3,250.00 |
| P | art 3: | Describe Yo | our Personal and | d Household Item | ns | | |
| Doy | you own | or have any lega | ıl or equitable inter | est in any of the follo | owing items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6. | | nold goods and fu es: Major appliand | urnishings ces, furniture, linens | , china, kitchenware | | | |
| | ✓ No ☐ Yes. | . Describe | | | | | |
| 7. | Electror Example | es: Televisions an | | eo, stereo, and digital ces including cell phor | | nputers, printers, scanners nedia players, games | ; |
| | ☐ No ✓ Yes. | . Describe W | ii, and cell phone | е | | | \$100.00 |
| 8. | Example | • | | prints, or other artwork | • | es, or other art objects; a, collectibles | |
| | ✓ No ☐ Yes. | . Describe | | | | | |
| 9. | | | graphic, exercise, an | nd other hobby equipm ls; musical instrument | | ool tables, golf clubs, skis; | ; |
| | ✓ No ☐ Yes. | . Describe | | | | | |
| 10. | Firearm Example | | shotguns, ammuniti | on, and related equipr | ment | | |
| | ✓ No ☐ Yes. | . Describe | | | | | |
| 11. | Clothes Example | | hes, furs, leather coa | ats, designer wear, sh | noes, accessorie | s | |
| | ☐ No ✓ Yes | . Describe N e | ecessary wearing | g appearl | | | \$200.00 |
| 12. | Jewelry Example | | elry, costume jewelry | /, engagement rings, v | wedding rings, h | eirloom jewelry, watches, o | gems, |
| | □ No ✓ Yes. | . Describe N e | eckless | | | | \$50.00 |
| 13. | | m animals es: Dogs, cats, bir | rds, horses | | | | |
| | ✓ No ☐ Yes. | Describe | | | | | |
| 14. | did not | • | household items ye | ou did not already lis | st, including an | y health aids you | |
| | _ | . Give specific rmation | | | | | |
| 15. | | | - | om Part 3, including | | pages you have | \$350.00 |

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| Deb | otor 1 | Kyle | | Steele | Case number (if known) | |
|-----|------------------|---|---|---------------------------------|---|--|
| | | First Name | Middle Name | Last Name | | |
| Р | art 4: | Describe Y | our Financial Ass | ets | | |
| Do | you owr | n or have any leg | al or equitable intere | st in any of the followir | ng? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | Cash Examp | les: Money you h | ave in your wallet in y | our home in a safe den | osit box, and on hand when you file your | ν |
| | □ No | petition | ave in your waner, in y | our nome, in a said dop | son box, and off hard when you me you | |
| | | | | | Cash: | . \$300.00 |
| 17. | • | - | ouses, and other simila | | of deposit; shares in credit unions, e multiple accounts with the same | |
| | ✓ No ☐ Ye | S | Institutio | n name: | | |
| 18. | | | or publicly traded stoo investment accounts v | :ks vith brokerage firms, mo | ney market accounts | |
| | ✓ No ☐ Ye | | Institution or issue | r name: | | |
| 19. | • | • | ock and interests in in partnership, and joint | • | orporated businesses, including | |
| | info | s. Give specific ormation about m | Name of entity: | | % of ownership: | |
| 20. | Negotia | able instruments i | nclude personal check | | egotiable instruments missory notes, and money orders. by signing or delivering them. | |
| | ✓ No Yes | s. Give specific ormation about | | | | |
| 21. | | nent or pension les: Interests in II profit-sharing | RA, ERISA, Keogh, 40 | 1(k), 403(b), thrift saving | gs accounts, or other pension or | |
| | | s. List each count separately. | Type of account: | Institution name: | | |
| 22. | Your sh Examp | | deposits you have ma | | tinue service or use from a company ctric, gas, water), telecommunications | |
| | ✓ No | S | | Institution name or indiv | idual: | |
| 23. | _ | ies (A contract fo | | | either for life or for a number of years) | |
| | _ | | Issuer name and o | | | |
| 24. | 26 U.S | .C. §§ 530(b)(1), § | on IRA, in an account 529A(b), and 529(b)(1) | | ogram, or under a qualified state tuition p | rogram. |
| | ✓ No | | Institution name a | nd description Separate | ally file the records of any interests 11 LLS | 2 8 521(6) |

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| Debt | or 1 | Kyle | Middle Norse | Steele | Case number | r (if known) | |
|------|------------|--|--------------------------------|---|---|------------------------|--|
| 25. | Trust | First Name ts, equitable or future | Middle Name interests in prope | Last Name rty (other than anythi | ng listed in line 1), and rig | ıhts or | |
| | | ers exercisable for yo | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | , | |
| | - | √es. Give specific | | | | | |
| | | nformation about them | | | | | |
| 26. | Exan | nples: Internet domain | | ts, and other intellect roceeds from royalties | ual property; and licensing agreements | | |
| | ☐ Y | No /es. Give specific nformation about them | | | | | |
| 27. | | nses, franchises, and nples: Building permits | - | - | on holdings, liquor licenses | s, professional licens | ses |
| | | No /es. Give specific nformation about them | | | | | |
| Mon | | property owed to yo | | | | | Current value of the |
| | , c. | property enter to ye | | | | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax r | refunds owed to you | | | | | |
| | - | No | | | | | • |
| | _ | es. Give specific info bout them, including w | | | | Federal | \$0.00 |
| | У | ou already filed the ret | turns | | | State: | \$0.00 |
| | а | and the tax years | ••••• | | | Local: | \$0.00 |
| 29. | Exan | • | p sum alimony, spo | usal support, child supp | port, maintenance, divorce | settlement, property | settlement |
| | ☐ Y | ∖o ∕es. Give specific info | rmation | | | Alimony: | \$0.00 |
| | _ | | | | | Maintenance: | \$0.00 |
| | | | | | | Support: | \$0.00 |
| | | | | | | Divorce settlement: | \$0.00 |
| | | | | | | Property settlement | |
| 30. | | | disability insurance | • | nefits, sick pay, vacation parade to someone else | ay, workers' | |
| | ☐ Y | No /es. Give specific info | rmation | | | | |
| 31. | | ests in insurance pol nples: Health, disability | | nealth savings account | (HSA); credit, homeowner | s, or renter's insurar | nce |
| | Ø N | | | | | | |
| | – 0 | es. Name the insurar company of each policy and list its value | / | ne: | Beneficiary: | Su | rrender or refund value: |
| | If you | | a living trust, expec | | ed nsurance policy, or are cur | rently | |
| | لت | No 'es. Give specific info | rmation | | | | |

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| Deb | tor 1 | Kyle | | Steele | Case number (if known) | |
|-----|---------------|-------------------------------------|---|---------------------------------------|--|--|
| 22 | Claime | First Name | Middle Name | Last Name | uit or made a demand for payment | |
| JJ. | Exampl | | | nsurance claims, or righ | | |
| | ✓ No ☐ Yes | s. Describe each | claim | | | |
| 34. | | contingent and use set off claims | • | f every nature, includir | ng counterclaims of the debtor and | |
| | ✓ No ☐ Yes | s. Describe each | ı claim | | | |
| 35. | Any fin | ancial assets yo | ou did not already lis | t | | |
| | ✓ No ☐ Yes | s. Give specific i | nformation | | | |
| 36. | | | - | · · · · · · · · · · · · · · · · · · · | y entries for pages you have | \$300.00 |
| Pa | art 5: | Describe Any | y Business-Relat | ed Property You O | wn or Have an Interest In. List an | y real estate in Part 1 |
| 37. | Do you | own or have an | ny legal or equitable i | nterest in any busines | s-related property? | |
| | | Go to Part 6. Go to line 38. | | | | |
| | | | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 38. | Accour | nts receivable or | r commissions you a | Iready earned | | |
| | ✓ No ☐ Yes | s. Describe | | | | |
| 39. | | les: Business-rel | ishings, and supplies ated computers, softw s, electronic devices | | copiers, fax machines, rugs, telephones, | |
| | ✓ No ☐ Yes | s. Describe | | | | |
| 40. | Machin | ery, fixtures, eq | juipment, supplies yo | ou use in business, and | I tools of your trade | |
| | ✓ No ☐ Yes | s. Describe | | | | |
| 41. | Invento | ory | | | | |
| | ✓ No ☐ Yes | s. Describe | | | | |
| 42. | Interes | ts in partnership | os or joint ventures | | | |
| | ✓ No ☐ Yes | s. Describe N | Name of entity: | | % of ownership: | |
| 43. | Custon | ner lists, mailing | g lists, or other comp | ilations | | |
| | ✓ No ☐ Yes | s. Do your lists No Yes. Des | | lentifiable information | (as defined in 11 U.S.C. § 101(41A))? | |
| 44. | Any bu | siness-related p | property you did not | already list | | |
| | ✓ No | s. Give specific i | nformation. | | | |

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| Debt | or 1 | Kyle | | Steele | Case number (if known) | |
|------|--------------|---------------------------|---|---------------------------|---|--|
| | | First Name | Middle Name | Last Name | | |
| | | | | | y entries for pages you have | \$0.00 |
| De | mt C. | Deceribe An | . Form and Com | maraial Fiahing Da | leted Branchty Var. Own or Have | n Interest In |
| Га | ırt 6: | | | farmland, list it in Pa | lated Property You Own or Have a rt 1. | an interest in. |
| | | | | • | | |
| 46. | Do you | ı own or have ar | ny legal or equitable in | nterest in any farm- or o | commercial fishing-related property? | |
| | ☑ No | . Go to Part 7. | | | | |
| | ☐ Ye | s. Go to line 47. | | | | |
| | | | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 47. | | nimals | | | | , , , , , , , , , , , , , , , , , , , |
| | | • | oultry, farm-raised fish | | | |
| | ✓ No ☐ Ye | | | | | |
| 48. | _ | either growing | or harvested | | | |
| | ☑ No | | | | | |
| | Ye | s. Give specific ormation | | | | |
| 49. | Farm a | and fishing equip | oment, implements, m | achinery, fixtures, and | tools of trade | |
| | ☑ No |) | | | | |
| | ☐ Ye | S | | | | |
| 50. | Farm a | and fishing supp | lies, chemicals, and f | eed | | |
| | ☑ No | | | | | |
| | ☐ Ye | S | | | | |
| 51. | Any fa | rm- and commer | rcial fishing-related pr | operty you did not alre | eady list | |
| | ☑ No | 1 | | | | |
| | | s. Give specific ormation | | | | |
| 52. | | | | m Part 6. including any | y entries for pages you have | |
| | | | • | , , | → | \$0.00 |
| Pa | rt 7: | Describe All | Property You Ow | n or Have an Intere | est in That You Did Not List Above | • |
| F 2 | Da | . have attended | mantis of ours librates | did not also de listo | | |
| 53. | - | | perty of any kind you ets, country club memb | - | | |
| | ✓ No |) | | | | |
| | _ | s. Give specific i | nformation. | | | |
| 54. | Add th | e dollar value of | all of your entries fro | m Part 7. Write that nu | ımber here | \$0.00 |

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| Debtor 1 | Kyle | | Steele | Case nu | umber (if known) | | |
|-----------|----------------------|--------------------------|----------------------|------------|------------------------------|---|------------|
| | First Name | Middle Name | Last Name | | | | _ |
| Part 8: | List the Total | s of Each Part of | this Form | | | | |
| 55. Part | 1: Total real estate | e, line 2 | | | → | | \$0.00 |
| 56. Part | 2: Total vehicles, l | ine 5 | | \$3,250.00 | | | |
| 57. Part | 3: Total personal a | and household items, | line 15 | \$350.00 | | | |
| 58. Part | 4: Total financial a | ssets, line 36 | | \$300.00 | | | |
| 59. Part | 5: Total business-ı | related property, line | 45 | \$0.00 | | | |
| 60. Part | 6: Total farm- and | fishing-related prope | rty, line 52 | \$0.00 | | | |
| 61. Part | 7: Total other prop | erty not listed, line 54 | 1 | +\$0.00 | | | |
| 62. Total | l personal property | . Add lines 56 through | gh 61 | \$3,900.00 | Copy personal property total | + | \$3,900.00 |
| 63. Total | l of all property on | Schedule A/B. Add | I line 55 + line 62. | | | | \$3,900.00 |

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| - Ca | 00 10 01200 | | ocument | Page 15 | | 0 10.00.40 | Desc Main |
|--|----------------------------|---|--------------------|----------------|--------------------|----------------------|-----------------------|
| Fill in this i | nformation to i | identify your case: | : | | | | |
| Debtor 1 | Kyle | Middle Niere | Steele | | | | |
| Debtor 2 | First Name | Middle Name | Last Name | | | | |
| (Spouse, if filin | g) First Name | Middle Name | Last Name | | | | |
| United States E Case number (if known) | Bankruptcy Court fo | or the: NORTHERN D | ISTRICT OF ILL | INOIS | | Check if the amended | |
| Official For | m 106C | | | | | | |
| Schedule (| C: The Prop | erty You Claim | as Exempt | | | | 04/16 |
| Using the proper space is needed | ty you listed on <i>Sc</i> | essible. If two married perhedule A/B: Property (Costo this page as many cost the thing page as | Official Form 106A | /B) as your so | ource, list the pr | operty that you cla | im as exempt. If more |
| For each item o | f property you cla | im as exempt you mu | st specify the an | ount of the e | exemption you | claim One way | of doing so |

is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identify the Property You Cla | aim as Exempt | | | | | | | |
|---|--------------------------------------|-------------------------|--|------------------------------------|--|--|--|--|
| . Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) | | | | | | | | |
| 2. For any property you list on Schedule A/B th | nat you claim as exen | npt, f | ill in the information b | pelow. | | | | |
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | | ount of the mption you claim | Specific laws that allow exemption | | | | |
| | Copy the value from Schedule A/B | | ck only one box for h exemption | | | | | |
| Brief description: Wii, and cell phone Line from Schedule A/B:7 | \$100.00 | | \$100.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | | | |
| Brief description: | \$200.00 | $\overline{\mathbf{Q}}$ | \$200.00 | 735 ILCS 5/12-1001(a), (e) | | | | |
| Necessary wearing appearI Line from Schedule A/B:11 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| Brief description: Neckless Line from Schedule A/B:12 | \$50.00 | | \$50.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | | | |
| 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes | | | | | | | | |

04/16

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| Debtor 1 | Kyle First Name | Middle Name | Steele Last Name | | Case number | se number (if known) | | |
|---|-----------------------|--|-------------------------------------|---------------------------------|---|-----------------------|--|--|
| Part 2: | Additional F | age | | | | | | |
| Brief description of the property and line on Schedule A/B that lists this property | | Current value of the portion you own | | ount of the mption you claim | Specific laws that allow exemption | | | |
| | | | Copy the value from Schedule A/B | | ck only one box for h exemption | | | |
| Brief descrip | otion: | | \$300.00 | 1 | \$300.00 100% of fair market | 735 ILCS 5/12-1001(b) | | |
| Line from So | chedule A/B: 1 | 6 | | _ | value, up to any applicable statutory limit | | | |

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| Fill in this info | ormation to ident | ify your cas | e: | | | |
|---|--|--|--|--|--|------------------------------|
| Debtor 1 | Kyle First Name | Middle Name | Steele Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bar | nkruptcy Court for the: | NORTHERN | DISTRICT OF ILLINOIS | <u>s</u> | | |
| Case number | | | | | Chook if this is | . on |
| (if known) | | | | | Check if this is amended filing | |
| Official Form | 106D | | | | | |
| | | o Have Cl | aims Secured by | Property | | 12/15 |
| 1. Do any credit No. Chee Yes. Fill Part 1: Lis List all secure claim, list the coreditor has a | on. If more space is not additional pages, writers have claims secunds this box and submitting all of the information of the All Secured Claims. If a creditor separately for particular claim, list the | ured by your pr t this form to the n below. ims or has more than each claim. If n | n one secured nore than one sin Part 2. As | cout, number the entri cn). edules. You have noth Column A Amount of claim | es, and attach it to this ning else to report on this Column B Value of collateral | is form. Column C Unsecured |
| creditor's nam | ible, list the claims in a e. | aipnabeticai orde | er according to the | Do not deduct the value of collateral | Do not deduct the that supports this portion | |
| 2.1 | | | ne property that | \$7,500.00 | \$2,500.00 | \$5,000.00 |
| CNAC IL115 | | secures the | e ciaim: GE STRATUS | | | |
| Creditor's name 2345 W. Jefferso Number Street | on St. | _ | | | | |
| | Debtor 2 only the debtors and anoth | Conting Unliquid Dispute Nature of li An agre Statutor Judgme | dated d en. Check all that apply. ement you made (such as ry lien (such as tax lien, m ent lien from a lawsuit ncluding a right to offset) | s mortgage or secured | car loan) | |
| Check if this c | ty debt | Car loa | | | | |
| Date debt was inc | urred | Last 4 digit | s of account number | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$7,500.00

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| Debtor 1 | Kyle | | Steele | Case number (it | Case number (if known) | | | | |
|---|--------------|-------------------|---|--|---|-----------------------------------|--|--|--|
| | First Name | Middle Name | e Last Name | | | | | | |
| Part 1: | | • | is page, number them is page. | Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any | | | |
| 2.2 | | | Describe the property that secures the claim: | \$750.00 | \$750.00 | | | | |
| Midwest Title Loans Creditor's name 915 N Lake St Number Street | | | 1997 Ford Escort | | | | | | |
| Aurora L 60506 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt | | 0506 P Code one. | As of the date you file, the claim is Contingent Unliquidated Disputed Nature of lien. Check all that apply An agreement you made (such a Statutory lien (such as tax lien, rule) Judgment lien from a lawsuit Other (including a right to offset) Title Loan | v. as mortgage or secured mechanic's lien) | l car loan) | | | | |
| Data daht | was incurred | | act 4 digits of account number | | | | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$750.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$8,250.00

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| | | | | • | | |
|---|--|--|--|---|--|-----------------------------|
| Fill in this inf | ormation to ic | lentify your c | ase: | | | |
| Debtor 1 | Kyle | | Steele | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Ba | nkruptcy Court for | the: NORTHER | RN DISTRICT OF ILLINOIS | | | |
| Case number | | | | _ | 1 0 | |
| (if known) | | | | _ | Check if this is a amended filing | an |
| Official Form | 106E/F | | | • | | |
| Schedule E | /F: Creditor | s Who Hav | e Unsecured Claims | | | 12/15 |
| Do not include an If more space is n to this page. On t | y creditors with pleeded, copy the the top of any add | partially secured Part you need, f ditional pages, w | and on Schedule G: Executory Co. I claims that are listed in Schedule ill it out, number the entries in the rrite your name and case number (secured Claims | D: Creditors Who H | old Claims Secur | ed by Property. |
| 1. Do any credi | tors have priority | unsecured clair | ms against you? | | | |
| - | to Part 2. | unoccurou ciun | me agamet you. | | | |
| Yes. | 10 T alt 2. | | | | | |
| claim. For ea show both pri- more space is claim, list the | nch claim listed, ide ority and nonpriority is needed for priority other creditors in l | entify what type o by amounts. As n y unsecured clair Part 3. | creditor has more than one priority uf claim it is. If a claim has both prior nuch as possible, list the claims in alms, fill out the Continuation Page of | ity and nonpriority am phabetical order acco Part 1. If more than c | ounts, list that clain rding to the creditor | m here and or's name. If |
| (For an explai | nation of each type | e of claim, see th | e instructions for this form in the inst | Total claim | Priority amount | Nonpriority amount |
| 2.1 | | | | \$3,650.00 | \$3,650.00 | \$0.00 |
| Robert J. Adam | s | | | Ψ5,050.00 | Ψ5,050.00 | Ψ0.00 |
| Priority Creditor's Nam | ne | | Last 4 digits of account number | | | |
| 901 W. Jackson Number Street | , Suite 202 | | When was the debt incurred? | 05/20/2016 | | |
| | | | As of the date you file, the claim | is: Check all that app | oly. | |
| | | | Contingent | | • | |
| Chicago City | | 60603 ZIP Code | Unliquidated Disputed | | | |
| Who incurred the | debt? Check o | ne. | Type of PRIORITY unsecured cla | im: | | |
| Debtor 1 only | | | Domestic support obligations | | | |
| Debtor 2 only Debtor 1 and [| Debtor 2 only | | Taxes and certain other debts Claims for death or personal in | , , | ent | |
| | the debtors and a | nother | intoxicated | jary write you were | | |
| ш | claim is for a com | munity debt | ✓ Other. Specify | | | |
| Is the claim subje | ct to offset? | | Attorney fees for this case | 9 | | |
| ✓ No Yes | | | | | | |

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| Debtor 1 | Kyle | | Steele | Case number (if known) | |
|---------------------|---|---|---|--|-------------|
| | First Name | Middle Name | Last Name | | |
| Part 2 | List All of | Your NONPRIORI | TY Unsecured Clain | ns | |
| | | | Labelian and an o | | |
| 3. Do a | - | | ed claims against you? | | |
| | Yes | thing to report in this pa | rt. Submit this form to the | e court with you other schedules. | |
| If a type | creditor has more to of claim it is. Do n | han one nonpriority uns not list claims already in | ecured claim, list the cred cluded in Part 1. If more | er of the creditor who holds each claim. litor separately for each claim. For each claim liste than one creditor holds a particular claim, list the of t the Continuation Page of Part 2. | |
| | | | | | Total claim |
| 4.1 | | | | | \$331.00 |
| ATT | Creditor's Name | | Last 4 digits of acco | unt number | |
| PO BOX | | | When was the debt i | | |
| Number | Street | | · · · · · · · · · · · · · · · · · · · | le, the claim is: Check all that apply. | |
| | | | | | |
| CAROL | CTDEAM | II 60407 | Disputed | | |
| CAROL | STREAM | IL 60197 State ZIP Code | Type of NONPRIORI | TY unsecured claim: | |
| | urred the debt? | Check one. | Student loans | Truiscource oleini. | |
| | or 1 only or 2 only | | Obligations arisin | g out of a separation agreement or divorce | |
| _ | or 1 and Debtor 2 o | only | • | eport as priority claims | |
| At lea | ast one of the debt | ors and another | Other. Specify | or profit-sharing plans, and other similar debts | |
| ☐ Chec | ck if this claim is f | or a community debt | UTILITY | | |
| | aim subject to offs | et? | | | |
| ✓ No ☐ Yes | | | | | |
| | | | | | |
| 4.2 | | | | | \$450.00 |
| Capital | | | Last 4 digits of acco | unt number | |
| Nonpriority P.O Box | Creditor's Name | | When was the debt i | ncurred? | |
| Number | Street | | As of the date you fi | le, the claim is: Check all that apply. | |
| | | | Contingent | | |
| | | | Unliquidated Disputed | | |
| Salt Lak | e City | UT 84130 State ZIP Code | _ | | |
| , | urred the debt? | Check one. | | TY unsecured claim: | |
| بخا | or 1 only | | Student loans Obligations arisin | g out of a separation agreement or divorce | |
| | or 2 only or 1 and Debtor 2 o | noly | that you did not re | eport as priority claims | |
| | or 1 and Debtor 2 of ast one of the debtor | | | or profit-sharing plans, and other similar debts | |
| _ | | or a community debt | Other. Specify Credit Card | | |
| _ | aim subject to offs | • | Cidali Gaid | | |
| ☑ No | • | | | | |
| Yes | | | | | |

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| Debtor 1 Kyle | Steele Case number (if known) | |
|---|---|-------------|
| First Name Middle Name | Last Name | |
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | em sequentially from the | Total claim |
| 4.3 | | \$750.00 |
| Illinois Tollway | Last 4 digits of account number 5 9 2 1 | · |
| Nonpriority Creditor's Name | When was the debt incurred? | |
| 2700 Ogden Avenue Number Street | As of the date you file, the claim is: Check all that apply. | |
| | _ Contingent | |
| | Unliquidated | |
| Downers Grove IL 60515 | Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. ☑ Debtor 1 only | Student loans | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other. Specify | |
| ☐ Check if this claim is for a community debt | Tollway violations | |
| Is the claim subject to offset? | | |
| No Vos | | |
| Yes | | |
| 4.4 | | \$400.00 |
| PAYDAY LOAN STORE | Last 4 digits of account number | 4.00.00 |
| Nonpriority Creditor's Name | When was the debt incurred? | |
| 1551 Plainfield Rd Number Street | As of the date you file, the claim is: Check all that apply. | |
| | _ ☐ Contingent | |
| | Unliquidated | |
| JOLIET IL 60435 | Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | Student loans | |
| ✓ Debtor 1 only✓ Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| ☐ Check if this claim is for a community debt | PAYDAY LOAN | |
| Is the claim subject to offset? | | |
| ☑ No | | |
| Yes | | |
| 4.5 | | \$270.00 |
| PHYSICIANS IMMEDIATE CARE | Last 4 digits of account number | |
| Nonpriority Creditor's Name | When was the debt incurred? | |
| PO BOX 544 DEPT 5390 Number Street | As of the date you file, the claim is: Check all that apply. | |
| Circuit Circuit | Contingent | |
| | Unliquidated | |
| MILWAUKEE WI 53201 | Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | Student loans | |
| ☑ Debtor 1 only ☐ Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| Check if this claim is for a community debt | ✓ Other. Specify Medical Debt | |
| Is the claim subject to offset? | | |
| ☑ No | | |
| □ Yes | | |

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| Debtor 1 | Kyle | | Steele | Case n | umber (if | | | |
|--|-------------------------------------|-----------------------|-----------------|--|---|---------------------------------|------------|-------------|
| | First Name | l | Middle Name | Last Name | | | , <u> </u> | |
| Part 2: | Your NO | NPRIO | RITY Unsecu | red Claims Continu | ation Page | | | |
| After listing | | on this pa | age, number the | m sequentially from the | | | | Total claim |
| 4.6 | | | | | | | | \$1,140.00 |
| SPARTAN City Who incur Debtor Debtor At leas | Street NBURG red the debt? 1 only | otors and for a co | another | Last 4 digits of account When was the debt incu As of the date you file, to Contingent Unliquidated Disputed Type of NONPRIORITY Student loans Obligations arising of that you did not report Debts to pension or put of the Control of | urred? the claim is: Ch unsecured clai ut of a separation rt as priority clai | i m: on agreen ims | nat apply. | |

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| Debtor 1 | Kyle | | | Steele | Case number (if known) |
|---|---|--|---|--|---|
| | First Name | Midd | e Name | Last Name | |
| Part 3: | List Others | s to Be N | otified Ab | out a Debt That You Alr | eady Listed |
| For ex credit debts | xample, if a colle tor in Parts 1 or 2 | ction agen , then list n Parts 1 o | cy is trying to the collection r 2, list the ac | o collect from you for a debt a agency here. Similarly, if y dditional creditors here. If yo | , for a debt that you already listed in Parts 1 or 2. you owe to someone else, list the original ou have more than one creditor for any of the u do not have additional parties to be notified for |
| | ns Collections | | | On which entry in Part | or Part 2 did you list the original creditor? |
| PO Box 6 Number | Street | | | Line of (Check) Collecting for -ATT UVERSE | nne): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Saint Pau | ıl | | 5164 IP Code | — Last 4 digits of account — | number |
| Physician Name PO Box 1 Number | ns Immediate C 5473 Street | are Chica | go | | or Part 2 did you list the original creditor? one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Loves Pa | ırk | | 1111 IP Code | Last 4 digits of account | number |
| Name | ILIATED GROU PORT VIEW DR Street | | | | or Part 2 did you list the original creditor? one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| ROCHES | TER | | 5902 IP Code | — Last 4 digits of account — | number |

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| Debtor 1 | Kyle | | Steele | Case number (if known) | | | |
|----------|------------|-------------|-----------|------------------------|--|--|--|
| | First Name | Middle Name | Last Name | | | | |

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Add the Amounts for Each Type of Unsecured Claim

| | | | | Total claim |
|--------------------------|-----|---|--------------|-------------|
| Total claims | 6a. | Domestic support obligations | 6a. | \$0.00 |
| nom runt r | 6b. | Taxes and certain other debts you owe the government | 6b. | \$0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. - | \$3,650.00 |
| | 6e. | Total. Add lines 6a through 6d. | 6d. | \$3,650.00 |
| | | | | Total claim |
| Total claims from Part 2 | 6f. | Student loans | 6f. | \$0.00 |
| | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | | \$0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. ⊣ | \$3,341.00 |
| | 6j. | Total. Add lines 6f through 6i. | 6j. | \$3,341.00 |

Part 4:

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| Fill in this information to identify your case: | | | | |
|---|-------------------|--------------------|-------------------|-----|
| Debtor 1 | Kyle | | Steele | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bar | nkruptcy Court fo | or the: NORTHERN D | ISTRICT OF ILLING | ois |
| Case number | | | | |
| (if known) | | | | |
| Official Form | 106G | | | |

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form. Tes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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| Fill in this in | formation to i | dentify your case | : | |
|--|--|---|--|--|
| Debtor 1 | Kyle | | Steele | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing | g) First Name | Middle Name | Last Name | _ |
| United States B | ankruptcy Court fo | or the: NORTHERN D | ISTRICT OF ILLINOIS | |
| Case number (if known) | | | | Check if this is an amended filing |
| Official Forn | n 106H | | | |
| Schedule F | l: Your Cod | ebtors | | 12/15 |
| page. On the top 1. Do you have No Yes 2. Within the lainclude Arizo No. Go Yes. D | e any codebtors? ast 8 years, have ona, California, Ida o to line 3. id your spouse, fo | al Pages, write your n (If you are filing a jo you lived in a commu sho, Louisiana, Nevada | ame and case number (if I int case, do not list either sp nity property state or terri | tory? (Community property states and territories Texas, Washington, and Wisconsin.) |
| 3. In Column 1 person show | es , list all of your c wn in line 2 again <i>Schedule D</i> (Offic | as a codebtor only if | that person is a guaranto dule E/F (Official Form 10 | lebtor if your spouse is filing with you. List the r or cosigner. Make sure you have listed the 6E/F), or Schedule G (Official Form 106G). Use |
| Column | 1: Your codebtor | | | Column 2: The creditor to whom you owe the debt |
| | | | | Check all schedules that apply: |
| Name | ia Russell overnty Place, A Street | \pt k | | Schedule D, line 2.2 Schedule E/F, line |
| A | | | 60506 | Schedule G, line Midwest Title Loans |
| Aurora City | | IL State | 60506 ZIP Code | |

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| | ill in this inform | nation to ide | ntify your case: | | | | | |
|-------------------------|---|--|---|--|------------------|--------------------------------|------------------|---|
| Ľ | | | illing your case. | Ctaala | | | | |
| | Debtor 1 | Kyle First Name | Middle Name | Steele Last Name | | | Che | ck if this is: |
| | Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | | An amended filing |
| | | | | | LING | ue. | П | A supplement showing postpetition |
| | United States Bankı Case number | ruptcy Court for | the: NORTHERN | DISTRICT OF IL | LINC | 113 | | chapter 13 income as of the following date: |
| | (if known) | | | | _ | | | MM / DD / YYYY |
| 0 | fficial Form 10 | <u>)61</u> | | | | | | |
| S | chedule I: Yo | ur Income | • | | | | | 12/15 |
| res inc abo yo | sponsible for supply clude information al out your spouse. If ur name and case r | ying correct in bout your spou f more space is | formation. If you are se. If you are separ needed, attach a se vn). Answer every c | e married and not rated and your spo eparate sheet to th | filing ouse i | jointly, and s not filing v | your : vith y | I Debtor 2), both are equally spouse is living with you, ou, do not include information any additional pages, write |
| 1. | Fill in your emploinformation. | oyment | | Debtor 1 | | | | Debtor 2 or non-filing spouse |
| | If you have more t | _ | mployment status | ☐ Employed | | | | ☐ Employed |
| | with information al | | inproyment status | ✓ Not employed | ed | | | ☐ Not employed |
| | additional employe | ers. | ccupation | | | | | |
| | Include part-time, or self-employed v | | mployer's name | | | | | |
| | Occupation may in student or homem applies. | _ | mployer's address | Number Street | | | | Number Street |
| | | | | | | | | |
| | | | | City | | State Zip Co | ode | City State Zip Code |
| | | н | ow long employed t | here? | | | | |
| . | Part 2: Give D | Details Abou | t Monthly Incom | e | | | | |
| Es | | | | | ing to | report for an | y line | , write \$0 in the space. Include your |
| | n-filing spouse unles | , , | | | 4 | | | on for that we can are the Board halour. If |
| - | | • | te sheet to this form. | er, combine the info | ormati | on for all em | pioye | rs for that person on the lines below. If |
| | | | | | | For Debtor | 1 | For Debtor 2 or non-filing spouse |
| 2. | | | ry, and commissions onthly, calculate what | | 2. | \$(| 0.00 | |
| 3. | Estimate and list | monthly overti | me pay. | | 3. | - \$ | 0.00 | |
| 4. | Calculate gross i | ncome. Add li | ne 2 + line 3. | | 4. | \$(| 0.00 | |

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| Deb | otor 1 | Kyle | | Steele | | | Case nu | ımbe | r (if know | /n) | | |
|-----|---|-------------------------------------|---|------------------------|--------------|-------------|----------|-------|------------|-----------|----------|----------------------------|
| | | First Name | Middle Name | Last Name | | For Debto | or 1 | | or Debto | | . | |
| | Con | v line 4 here | |) | 4. | | \$0.00 | _ | | | | |
| 5. | | all payroll dec | | | •• | - | Ψ0.00 | | | | | |
| ٥. | | | e, and Social Security deduction | s | 5a. | | \$0.00 | | | | | |
| | | • | ontributions for retirement plans | | 5b. | | \$0.00 | | | | | |
| | | - | ntributions for retirement plans | | 5c. | | \$0.00 | | | | | |
| | | - | ayments of retirement fund loan | s | 5d. | | \$0.00 | | | | | |
| | | Insurance | -, | _ | 5e. | | \$0.00 | | | | | |
| | 5f. | Domestic sur | pport obligations | | 5f. | | \$0.00 | | - | | | |
| | 5g. | Union dues | 3 | | 5g. | | \$0.00 | | | | | |
| | _ | Other deduct Specify: | ions. | | 5h. + | | \$0.00 | | | | | |
| 6. | | · · · — | eductions. Add lines 5a + 5b + | 5c + 5d + 5e + 5f + | 6. | | \$0.00 | | | | | |
| 7. | | | , , | ct line 6 from line 4. | 7. | | \$0.00 | | | | | |
| 8. | | | me regularly received: | | | | | | | | | |
| | 8a. | | om rental property and from ope ofession, or farm | erating a | 8a. | | \$0.00 | | | | | |
| | | gross receipts | ment for each property and busine, ordinary and necessary business hly net income. | o o | | | | | | | | |
| | 8b. | Interest and o | lividends | | 8b. | | \$0.00 | | | | | |
| | 8c. | | ort payments that you, a non-filin gularly receive | g spouse, or a | 8c. | | \$0.00 | | | | | |
| | | | ny, spousal support, child support, ment, and property settlement. | maintenance, | | | | | | | | |
| | 8d. | Unemployme | nt compensation | | 8d. | \$1,4 | 43.00 | | | | | |
| | 8e. | Social Securi | ty | | 8e. | | \$0.00 | | | | | |
| | 8f. | Include cash a | ment assistance that you regula assistance and the value (if known ce that you receive, such as food s or the Supplemental Nutrition Assis asidies. | or any non- stamps | | | | | | | | |
| | | Specify: | | | 8f. | | \$0.00 | | | | | |
| | 8g. | Pension or re | tirement income | | 8g. | | \$0.00 | | | | | |
| | 8h. | Other month! Specify: | y income. | | 8h. + | | \$0.00 | | | | | |
| 9. | Add | l all other inco | me. Add lines 8a + 8b + 8c + 8d - | + 8e + 8f + 8g + 8h. | 9. | \$1,4 | 43.00 | | | | | |
| 10. | Cal d | culate monthly the entries in li | income. Add line 7 + line 9. ine 10 for Debtor 1 and Debtor 2 o | r non-filing spouse. | 10. | \$1,4 | 43.00 | + | | | =[| \$1,443.00 |
| 11. | . State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. | | | | | | | | | | | |
| | Do r | not include any | amounts already included in lines | 2-10 or amounts tha | t are n | ot availabl | e to pay | expe | enses list | ted in Sc | hed | ule J. |
| | Spe | cify: | | | | | | | | _ 11. | + | \$0.00 |
| 12. | inco | me. Write that | n the last column of line 10 to the amount on the Summary of Your | | | | | | | 12. | Į | \$1,443.00 |
| 13. | | applies. you expect an | increase or decrease within the | year after you file t | his for | m? | | | | | | Combined nonthly income |
| | | No. | Debtor was terminated from | • • | | | ow lives | s wit | th freind | ds and i | is n | ot paving |
| | Ø | Yes. Explain: | | , | 22.0 | 9 | | | | | | E(1 · · |
| | | | | | | | | | | | | |

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| i | - ill in this inforr | mation to identi | fy your case: | | Ob a | -1. :£ 4l-:- | | |
|----------|---|--|--|----------------------|------|----------------------|-------------|--|
| | Debtor 1 | Kyle | Stee | ele | Cne | ck if this An ame | nded filing | |
| | Debtor 1 | First Name | Middle Name Last I | | | | | |
| | Debtor 2 (Spouse, if filing) | First Name | Middle Name Last i | Name | | followin | | s of the |
| | United States Bank | cruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | MM / DI | D / YYYY | |
| | Case number (if known) | | | | | | | |
| O | fficial Form 10 | 06J | | | | | | |
| S | chedule J: Y | our Expense | S | | | | | 12/1 |
| co na | rrect information. me and case numb | If more space is ne | e. If two married people are to eded, attach another sheet to wer every question. | | | | | |
| 1. | Is this a joint cas | se? | | | | | | |
| 2. | ✓ No. Go to lin Yes. Does I No Ye Do you have dep | ne 2. Debtor 2 live in a second seco | eparate household? e Official Form 106J-2, Expens No Yes. Fill out this information | Dependent's relation | nshi | | Dependent's | Does dependen |
| | Do not list Debtor Debtor 2. | 1 and \Box | for each dependent | Debtor 1 or Debtor | 2 | | age | live with you? No |
| | Do not state the conames. | dependents' | | | | | | Yes No Yes No No No Yes No No No No Yes No Yes |
| 3. | Do your expense expenses of peo yourself and you | ple other than | ✓ No □ Yes | | | | | |
| i | Part 2: Estim | ate Your Ongoi | ng Monthly Expenses | | | | | |
| to | | s of a date after the | ruptcy filing date unless you bankruptcy is filed. If this is | | | | | |
| | | | n government assistance if yo Schedule I: Your Income (Of | | | | Your expens | ses |
| 4. | | | enses for your residence. any rent for the ground or lot. | | | 4 | l | |
| | If not included in | | | | | | | |
| | 4a. Real estate | taxes | | | | 4 | ŀa | |
| | 4b. Property, ho | meowner's, or renter | 's insurance | | | 4 | lb | |
| | 4c. Home maint | enance, repair, and | upkeep expenses | | | 4 | łc | |
| | 4d. Homeowner | 's association or con | dominium dues | | | 4 | ŀd. | |

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| Deb | otor 1 | Kyle First Name | | Steele ast Name | Case number (if known) | |
|-----|------------|---------------------|---|------------------------------|------------------------|----------|
| | | First Name | Middle Name L | ast Name | | |
| | | | | | Your | expenses |
| 5. | Add | litional mortgage | payments for your residence, su | uch as home equity loans | 5. | |
| 6. | Utili | ities: | | | | |
| | 6a. | Electricity, heat, | natural gas | | 6a | |
| | 6b. | Water, sewer, ga | rbage collection | | 6b | |
| | 6c. | Telephone, cell p | phone, Internet, satellite, and | | 6c | \$35.00 |
| | 6d. | Other. Specify: | | | 6d. | |
| 7. | Foo | d and housekeep | ing supplies | | 7. | \$350.00 |
| 8. | Chil | dcare and childre | en's education costs | | 8. | |
| 9. | Clo | thing, laundry, an | d dry cleaning | | 9. | \$50.00 |
| 10. | Per | sonal care produ | cts and services | | 10. | \$50.00 |
| 11. | Med | lical and dental e | xpenses | | 11. | \$50.00 |
| 12. | | nsportation. Inclu | ide gas, maintenance, bus or train ar payments. | | 12. | \$150.00 |
| 13. | Ente | | , recreation, newspapers, | | 13. | |
| 14. | | | ons and religious donations | | 14. | |
| 15. | | ırance. | | | | |
| | Do r | not include insurar | nce deducted from your pay or incl | uded in lines 4 or 20. | | |
| | 15a | . Life insurance | | | 15a. ₋ | |
| | 15b | . Health insurand | ce | | 15b | |
| | 15c. | . Vehicle insuran | ce | | 15c | \$58.00 |
| | 15d | . Other insurance | e. Specify: | | 15d. | |
| 16. | Tax Spe | | de taxes deducted from your pay o | | 16 | |
| 17. | Inst | allment or lease | payments: | | | |
| | 17a | . Car payments f | or Vehicle 1 | | 17a. | |
| | 17b | . Car payments f | or Vehicle 2 | | 17b. | |
| | 17c. | . Other. Specify: | : | | 17c. | |
| | 17d | . Other. Specify: | : | | 17d. | |
| 18. | You | r payments of ali | mony, maintenance, and suppor pay on line 5, Schedule I, Your In | t that you did not report as | 18. | \$350.00 |
| 19. | | | make to support others who do | - | 19. | |
| 20. | Oth | - | expenses not included in lines 4 | | | |
| | 20a | . Mortgages on o | other property | | 20a. | |
| | 20b | . Real estate tax | es | | 20b. | |
| | 20c. | . Property, home | owner's, or renter's insurance | | 20c. | |
| | 20d | . Maintenance, re | epair, and upkeep expenses | | 20d | |
| | 20e | . Homeowner's a | ssociation or condominium dues | | 20e. | |

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| Deb | tor 1 | Kyle | | Steele | Case number (if know | wn) |
|---------|-------------------------|---|---|---|----------------------|------------|
| | | First Name | Middle Name | Last Name | · | , |
| 21. | Othe | er. Specify: | | | 21. | + |
| 22. Cal | | culate your monthly | y expenses. | | | |
| | 22a. | . Add lines 4 throu | ıgh 21. | | 22a. | \$1,093.00 |
| | 22b. | Copy line 22 (mo | onthly expenses for Debto | or 2), if any, from Official Form 106J-2. | 22b. | |
| | 22c. | Add line 22a and | I 22b. The result is your r | monthly expenses. | 22c. | \$1,093.00 |
| 23. | Calc | culate your monthl | y net income. | | | |
| | 23a. | Copy line 12 (you | ur combined monthly inco | ome) from Schedule I. | 23a. | \$1,443.00 |
| | 23b. | . Copy your month | nly expenses from line 22 | c above. | 23b. | \$1,093.00 |
| | 23c. | | onthly expenses from you r monthly net income. | r monthly income. | 23c. | \$350.00 |
| 24. | Doy | ou expect an incre | ease or decrease in you | ır expenses within the year after you | file this form? | |
| | | example, do you ex ment to increase or | expect your mortgage ge? | | | |
| | $\overline{\mathbf{V}}$ | No. | | | | |
| | | Yes. Explain here: | : | | | |
| | | | | | | |
| | | l | | | | |

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| Fill in this inf | ormation to i | dentify your case: | : | | |
|---------------------|-------------------|--------------------|---------------------|---|-----------------------|
| Debtor 1 | Kyle | | Steele | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Ba | nkruptcy Court fo | or the: NORTHERN D | ISTRICT OF ILLINOIS | _ | |
| Case number | | | | | ☐ Check if this is an |
| (if known) | | | | | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Р | art 1: Summarize Your Assets | |
|----|--|--------------------------------------|
| | | Your assets Value of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) | |
| | 1a. Copy line 55, Total real estate, from Schedule A/B | \$0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$3,900.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$3,900.00 |
| Р | art 2: Summarize Your Liabilities | |
| | | Your liabilities Amount you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$8,250.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$3,650.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$3,341.00 |
| | Your total liabilities | \$15,241.00 |
| P | art 3: Summarize Your Income and Expenses | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$1,443.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$1,093.00 |

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| | | | 2000 | , | |
|---|--|------------------------|--|---|---------------------|
| Debtor 1 | | | Steele | Case number (if known) | |
| | First Name | Middle Name | Last Name | | |
| Part 4 | 4: Answer The | se Questions fo | or Administrative and Sta | tistical Records | |
| 6. Are | you filing for bankru | intcy under Chante | rs 7 11 or 13? | | |
| - | , , | . , . | , | | ur athar a ahadulaa |
| | Yes | ig to report on this p | art of the form. Check this box a | and submit this form to the court with you | or other schedules. |
| 7. Wh | at kind of debt do yo | u have? | | | |
| | • | • | | "incurred by an individual primarily for a statistical purposes. 28 U.S.C. § 159. | personal, |
| | Your debts are not this form to the cour | | | port on this part of the form. Check this | box and submit |
| 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | | | | | \$3,579.00 |
| 9. Co | py the following spec | cial categories of cl | aims from Part 4, line 6 of <i>Sch</i> | edule E/F: | |
| | | | | Total claim | |
| Fro | om Part 4 on <i>Schedul</i> | le E/F, copy the foll | owing: | | |
| 9a. | Domestic support ob | oligations. (Copy line | e 6a.) | \$0.00 | <u>)</u> |
| 9b. | Taxes and certain of | her debts you owe th | ne government. (Copy line 6b.) | \$0.00 | <u>)</u> |
| 9c. | Claims for death or p | personal injury while | you were intoxicated. (Copy line | e 6c.) \$0.0 0 | <u>)</u> |
| 94 | Student loans (Con | v line 6f) | | \$0.00 |) |

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$0.00

\$0.00

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| | | D | ocument rag | yc 54 01 47 | |
|---|---------------------|-----------------------|-------------------------|---|----------|
| Fill in this inf | ormation to id | entify your case: | | | |
| Debtor 1 | Kyle | | Steele | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Bar | nkruptcy Court for | the: NORTHERN D | ISTRICT OF ILLINOIS | <u>s</u> | |
| Case number (if known) | | | · | ☐ Check if this is an amended filing | |
| Official Form | 106Dec | | | | |
| Declaration | About an Ir | dividual Debt | or's Schedules | | 12/15 |
| concealing prope \$250,000, or impri | rty, or obtaining r | noney or property by | | schedules. Making a false statement, vith a bankruptcy case can result in fines up to , 1519, and 3571. | |
| Did you pay o | or agree to pay so | omeone who is NOT | an attorney to help you | u fill out bankruptcy forms? | |
| <u> </u> | ame of person | | | Attach Bankruptcy Petition Preparer's Notic | ^ |
| Tes. INC | ame or person | | | Declaration, and Signature (Official Form 1 | |
| l Inder nenalt | y of periury I dec | lare that I have read | the summary and sche | edules filed with this declaration and that they are | |

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

| X /s/ Kyle Steele | X |
|--|-----------------------|
| Kyle Steele, Debtor 1 | Signature of Debtor 2 |
| Date <u>05/20/2016</u> MM / DD / YYYY | Date MM / DD / YYYY |

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| Kyle irst Name irst Name ruptcy Court for th | Middle Name Middle Name | | Steele Last Name | | | |
|--|--|--|--|--|---|--|
| irst Name | Middle Name | | | | | |
| | | | Last Name | | | |
| ruptcy Court for th | | | | | | |
| | e. NOR I DEI | RN DIST | RICT OF II | LINOIS | | |
| | o. <u>1101111121</u> | | | | | |
| | | | | _ | ☐ Check if amende | this is an d filing |
| 07 | | | | | | |
| | ffairs for | Indivi | duals Fi | iling for Bankrur | otcv | 04/16 |
| If more space is number (if know | s needed, atta /n). Answer e | ch a sepa every que | arate sheet estion. | to this form. On the top | of any additional pag | |
| | | ere othe | r than where | e you live now? | | |
| of the places you | lived in the la | st 3 years | s. Do not inc | clude where you live now. | | |
| | | | | Debtor 2: | | Dates Debtor 2 lived there |
| | | | | ☐ Same as Debtor | 1 | Same as Debtor 1 |
| ntry Place | | From | 2014 | | | From |
| eet | | To _ | 2016 | Number Street | | To |
| IL | 60506 | - | | | | _ |
| State | ZIP Code | - | | City | State ZIP Code | _ |
| | | | | Debtor 2: | | Dates Debtor 2 lived there |
| | | | | ☐ Same as Debtor | 1 | Same as Debtor 1 |
| Street | | From | | | | From |
| | | To _ | | Number Street | | То |
| IL | 60435 | _ | | | | _ |
| State | ZIP Code | = | | City | State ZIP Code | _ |
| | accurate as posa. If more space is a number (if known posa). If more space is a number (if known posa). If more space is a number (if known posa). It is a space is a number (if known posa). It is a space is a number (if known posa). It is a number (if kn | Financial Affairs for laccurate as possible. If two nor life more space is needed, attained an umber (if known). Answer of Details About Your Marinarrent marital status? 3 years, have you lived anywhold of the places you lived in the lacet like a ZIP Code State ZIP Code Street Laccurate as possible. If two nor life was a possible was a possible was a possible. If two nor life was a possible wa | Financial Affairs for Individual accurate as possible. If two married pure life more space is needed, attach a separate number (if known). Answer every que de Details About Your Marital State aurrent marital status? 3 years, have you lived anywhere other life of the places you lived in the last 3 years lived the lived the lived the life of | Financial Affairs for Individuals Financial Status and Warrent marital Status About Your Marital Status and Warrent marital Status? 3 years, have you lived anywhere other than where I of the places you lived in the last 3 years. Do not incompate Debtor 1 lived there Dates Debtor 1 Individuals Indivi | Accurate as possible. If two married people are filing together, both are east of more space is needed, attach a separate sheet to this form. On the top a number (if known). Answer every question. Details About Your Marital Status and Where You Lived Before the number (if known) and the last 3 years, have you live anywhere other than where you live now? I of the places you lived in the last 3 years. Do not include where you live now. Dates Debtor 1 Debtor 2: | Financial Affairs for Individuals Filing for Bankruptcy accurate as possible. If two married people are filing together, both are equally responsible for if more space is needed, attach a separate sheet to this form. On the top of any additional page in number (if known). Answer every question. Details About Your Marital Status and Where You Lived Before |

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| Debtor 1 | Kyle | Middle Nome | Steele | Case nur | mber (if known) | |
|------------------|--|--|---|--|---|--|
| | First Name | Middle Name | Last Name | | | |
| Part 2: | Explain the | Sources of Y | our Income | | | |
| Fill in t | he total amount of | income you recei | nent or from operating a but wed from all jobs and all bus income that you receive toge | inesses, including part | | endar years? |
| □ No ✓ Ye | o es. Fill in the detail | S. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions | Sources of income Check all that apply. | Gross income (before deductions and exclusions |
| | ary 1 of the currer ou filed for bankru | - | Wages, commissions, bonuses, tips | \$14,316.00 | Wages, commissions, bonuses, tips | |
| | | | Operating a business | | Operating a business | |
| For the las | t calendar year: | | Wages, commissions, bonuses, tips | \$39,426.00 | Wages, commissions, bonuses, tips | |
| January 1 | to December 31, | <u>2015</u>) YYYY | Operating a business | | Operating a business | |
| | endar year before | | Wages, commissions, bonuses, tips | \$35,827.00 | Wages, commissions, bonuses, tips | |
| January 1 | to December 31, _2 | <u>2014</u>) YYYY | Operating a business | | Operating a business | |
| Include unemp | e income regardles ployment; and other ambling and lottery | s of whether that r public benefit pa | yments; pensions; rental inc | es of other income are come; interest; dividend | alimony; child support; Socia ds; money collected from law eceived together, list it only c | vsuits; royalties; |
| List ea | ch source and the | gross income from | m each source separately. [| Do not include income | that you listed in line 4. | |
| □ No ☑ Ye | o es. Fill in the detail | S. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions | Sources of income Describe below. | Gross income from each source (before deductions and exclusions |
| | ary 1 of the curre | • | Unemployment | \$900.00 | | |
| he date yo | ou filed for bankru | ptcy: | | | | |
| | t calendar year: | | | | | |
| January 1 | to December 31, 7 | 2015) | | | | |
| | endar year before | | | | | |

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| Deb | otor 1 | Kyle | | Steele | Case number (if known) | | | |
|--|----------------------------------|---|---|--|---|--|--|--|
| | | First Name | Middle Name | Last Name | | | | |
| P | art 3: | List Ce | ertain Payments Yo | ou Made Before You F | iled for Bankruptcy | | | |
| 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? | | | | | | | | |
| | □ No. | | | has primarily consumer d ily for a personal, family, or | ebts. Consumer debts are defined in 11 U.S.C. § 101(8) as household purpose." | | | |
| | | During t | During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? | | | | | |
| | | ☐ No. | Go to line 7. | | | | | |
| | | ☐ Yes. | total amount you paid t | hat creditor. Do not include | f \$6,425* or more in one or more payments and the payments for domestic support obligations, such as yments to an attorney for this bankruptcy case. | | | |
| | | * Subjec | ct to adjustment on 4/01/ | 19 and every 3 years after t | hat for cases filed on or after the date of adjustment. | | | |
| | ✓ Yes | . Debtor | 1 or Debtor 2 or both h | ave primarily consumer d | ebts. | | | |
| | | During t | he 90 days before you fi | led for bankruptcy, did you | pay any creditor a total of \$600 or more? | | | |
| | | ✓ No. | Go to line 7. | | | | | |
| | | ☐ Yes. | creditor. Do not includ | | f \$600 or more and the total amount you paid that pport obligations, such as child support and alimony. is bankruptcy case. | | | |
| 7. | Insiders corpora agent, in | 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Is include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; ations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations is child support and alimony. | | | | | | |
| | ✓ No | s. List all pa | ayments to an insider. | | | | | |
| 8. | | 1 year befo | • | ptcy, did you make any pa | nyments or transfer any property on account of a debt that | | | |
| | Include | payments of | on debts guaranteed or o | cosigned by an insider. | | | | |
| | ✓ No ☐ Yes | s. List all pa | ayments that benefited a | n insider. | | | | |
| | | | | | | | | |
| P | art 4: | Identif | y Legal Actions, Re | epossessions, and Fo | reclosures | | | |
| 9. | List all s | such matter | _ | | any lawsuit, court action, or administrative proceeding? ons, divorces, collection suits, paternity actions, support or custody | | | |
| | ✓ No ☐ Yes | s. Fill in the | e details. | | | | | |

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| Deb | otor 1 | Kyle First Name | Middle Name | Steele Last Name | Case number (if k | nown) | |
|--------------------|---------------|--|----------------------|--|--|---|-------------------|
| 10. | seized, | | filed for bankrupt | cy, was any of your pro | operty repossessed, foreclose | d, garnished, attach | ed, |
| | | Go to line 11. s. Fill in the informa | ation below. | | | | |
| 11. | | - | | ptcy, did any creditor, i make a payment becaus | ncluding a bank or financial in se you owed a debt? | stitution, set off any | / |
| | ✓ No ☐ Yes | s. Fill in the details. | | | | | |
| 12. | | | - | cy, was any of your pro stodian, or another offic | operty in the possession of an cial? | assignee for the be | nefit of |
| | ☑ No □ Yes | 3 | | | | | |
| P | art 5: | List Certain | Gifts and Cont | ributions | | | |
| 13. | Within | 2 years before you | ı filed for bankrup | otcy, did you give any g | ifts with a total value of more t | than \$600 per perso | n? |
| | ✓ No | s. Fill in the details | for each gift. | | | | |
| 14. | | 2 years before you charity? | ı filed for bankrup | otcy, did you give any g | ifts or contributions with a tota | al value of more tha | n \$600 |
| | ☑ No □ Yes | s. Fill in the details | for each gift or cor | ntribution. | | | |
| P | art 6: | List Certain | Losses | | | | |
| 15. | | 1 year before you isaster, or gambli | • | cy or since you filed fo | r bankruptcy, did you lose any | thing because of th | eft, fire, |
| | ✓ No ☐ Yes | s. Fill in the details | | | | | |
| P | art 7: | List Certain | Payments or T | ransfers | | | |
| 16. | anyone | you consulted ab | out seeking bank | ruptcy or preparing a b | else acting on your behalf pay ankruptcy petition? ling agencies for services requir | | • |
| | □ No ✓ Yes | s. Fill in the details | | | | | |
| | bert J. A | | | Description and value of | of any property transferred | Date payment or transfer was made | Amount of payment |
| | | kson, Suite 202 | | | | 05/20/2016 | \$350.00 |
| vuri | nber Str | eet | | | | | |
| Chi City | icago | IL State | 60603 ZIP Code | | | | |
| Ema | il or websi | te address | | | | | |
| ers | on Who M | lade the Payment, if No | ot You | | | | |

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| Deb | tor 1 | Kyle | Middle Name | Steele Last Name | Case number (if known) | |
|-----------|--|---|--|--|--|------|
| 17. | anyone | who promised to | iled for bankrupt help you deal wi | tcy, did you or anyone els | se acting on your behalf pay or transfer any property to ake payments to your creditors? | |
| | ✓ No ☐ Yes | . Fill in the details. | | | | |
| 18. | | - | • | ptcy, did you sell, trade, o e of your business or fina | or otherwise transfer any property to anyone, other than ancial affairs? | I |
| | | • | | made as security (such as ave already listed on this st | granting of a security interest or mortgage on your property atement. |). |
| | ✓ No ☐ Yes | . Fill in the details. | | | | |
| 19. | you are | | | uptcy, did you transfer an called asset-protection dev | y property to a self-settled trust or similar device of whices.) | ich |
| | ✓ No ☐ Yes | . Fill in the details. | | | | |
| Pa | art 8: | List Certain F | inancial Acco | ounts, Instruments, S | Safe Deposit Boxes, and Storage Units | |
| 20. | | l year before you f closed, sold, mov | • | • | counts or instruments held in your name, or for your | |
| | | | • | other financial accounts; on ations, and other financial | certificates of deposit; shares in banks, credit unions, broke institutions. | rage |
| | ☑ No | | | | | |
| 24 | Yes | . Fill in the details. | | | | |
| 21. | Do you | | | 1 year before you filed for | bankruptcy, any safe deposit box or other depository | |
| 21. | Do you for secu | now have, or did y | | 1 year before you filed for | bankruptcy, any safe deposit box or other depository | |
| | Do you for section No Yes | now have, or did y urities, cash, or oth | ner valuables? | | bankruptcy, any safe deposit box or other depository home within 1 year before you filed for bankruptcy? | |
| | Do you for section No Yes Have you No | now have, or did y urities, cash, or oth | ner valuables? | | | |
| 22. | Do you for section No Yes Have you No | now have, or did y urities, cash, or other. Fill in the details. The stored property Fill in the details. | ner valuables? in a storage unit | | home within 1 year before you filed for bankruptcy? | |
| 22. Pa | Do you for section Yes Have you Yes They you Yes Art 9: Do you | now have, or did y urities, cash, or other. Fill in the details. The stored property Fill in the details. Identify Property | ner valuables? in a storage unit erty You Hold y property that s | t or place other than your | home within 1 year before you filed for bankruptcy? | |

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| Deb | otor 1 | Kyle | | Steele | Case number (if known) | |
|-----|------------------|---|---|---|---|--------------|
| | | First Name | Middle Name | Last Name | | |
| P | art 10: | Give Details | About Environn | nental Information | | |
| or | the purp | oose of Part 10, th | e following definition | ons apply: | | |
| - | hazardo | us or toxic substa | nce, wastes, or mat | erial into the air, land, so | tion concerning pollution, contamination, i oil, surface water, groundwater, or other m stances, wastes, or material. | |
| | | - | | as defined under any env including disposal sites. | vironmental law, whether you now own, op | erate, or |
| | | | | onmental law defines as taminant, or similar item | a hazardous waste, hazardous substance, n. | toxic |
| Rep | ort all n | otices, releases, a | and proceedings tha | at you know about, regar | dless of when they occurred. | |
| 24. | Has an law? | y governmental u | nit notified you that | you may be liable or pot | tentially liable under or in violation of an er | nvironmental |
| | ✓ No | s. Fill in the details | i. | | | |
| 25. | ☑ No | ou notified any go | | any release of hazardous | s material? | |
| 26. | Have y | | any judicial or adm | ninistrative proceeding u | nder any environmental law? Include settl | ements and |
| | ✓ No | s. Fill in the details | | | | |
| P | art 11: | Give Details | About Your Bus | siness or Connection | ns to Any Business | |
| 27. | Within busine | | u filed for bankrupto | cy, did you own a busine | ess or have any of the following connection | is to any |
| | | A member of a li A partner in a pa An officer, direct | mited liability compar rtnership or, or managing exec | a trade, profession, or other by (LLC) or limited liability a cutive of a corporation or equity securities of a co | | |
| | | | e applies. Go to Par oply above and fill in | t 12. the details below for each | business. | |
| 28. | | | u filed for bankrupto creditors, or other p | | al statement to anyone about your busines | ss? Include |
| | □ No □ Yes | s. Fill in the details | below. | | | |

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| Debtor 1 | Kyle | | Steele | Case number (if known) |
|---------------|--------------------------------------|-----------------------|-----------------------------|---|
| | First Name | Middle Name | Last Name | · · · · · · · · · · · · · · · · · · · |
| Part 12 | Sign Belov | W | | |
| that answe | ers are true and only fraud in conne | correct. I understand | hat making a false state | tachments, and I declare under penalty of perjury ment, concealing property, or obtaining money or s up to \$250,000, or imprisonment for up to 20 years, |
| X /s/ Kyl | e Steele | | X | |
| Kyle St | eele, Debtor 1 | | Signature of Debt | tor 2 |
| Date _ | 05/20/2016 | | Date | |
| Did you at | tach additional p | ages to Your Statemer | nt of Financial Affairs for | r Individuals Filing for Bankruptcy (Official Form 107)? |
| ✓ No ☐ Yes | | | | |
| Did you pa | ay or agree to pa | y someone who is not | an attorney to help you | fill out bankruptcy forms? |
| ☑ No | | | | |
| | Name of person _ | | | Attach the Bankruptcy Petition Preparer's Notice, |
| | | | | Declaration, and Signature (Official Form 119). |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liqudation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| + | \$75 | filing fee administrative fee trustee surcharge |
|---|-------|---|
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| + | | filing fee administrative fee |
|---|---------|----------------------------------|
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee \$75 administrative fee \$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers.
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

 $\frac{\text{http://www.uscourts.gov/bkforms/bankruptcy_forms}}{\text{.html\#procedure.}}$

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS WESTERN DIVISION (ROCKFORD)

| In r | e Kyle Steele | Case No. | | |
|------|--|---------------|---------------------------------|--|
| | | Chapter | 13 | |
| | DISCLOSURE OF COMPENSATION OF ATTORN | IEY FOR | DEBTOR | |
| t | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the at hat compensation paid to me within one year before the filing of the petition in bankservices rendered or to be rendered on behalf of the debtor(s) in contemplation of as as follows: | kruptcy, or a | agreed to be paid to me, for | |
| F | For legal services, I have agreed to accept | \$4 | 1,000.00 | |
| F | Prior to the filing of this statement I have received | | \$350.00 | |
| E | Balance Due | \$3 | 3,650.00 | |
| 2 | The source of the compensation paid to me was: ☑ Debtor ☐ Other (specify) | | | |
| 3. | The source of compensation to be paid to me is: | | | |
| | ☑ Debtor ☐ Other (specify) | | | |
| 4. | ✓ I have not agreed to share the above-disclosed compensation with any other p associates of my law firm. | erson unles | ss they are members and | |
| İ | I have agreed to share the above-disclosed compensation with another persor associates of my law firm. A copy of the agreement, together with a list of the compensation, is attached. | | | |
| 5. I | n return for the above-disclosed fee, I have agreed to render legal service for all as | spects of the | e bankruptcy case, including: | |
| | Analysis of the debtor's financial situation, and rendering advice to the debtor in pankruptcy; | determining | g whether to file a petition in | |
| ŀ | o. Preparation and filing of any petition, schedules, statements of affairs and plan | which may b | pe required; | |
| (| c. Representation of the debtor at the meeting of creditors and confirmation hearin | g, and any | adjourned hearings thereof; | |

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| B2030 (| Form | 2030) | 1 | (12/15) |
|---------|------|-------|---|---------|
| | | | | |

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

05/20/2016

/s/ Robert J. Adams & Associates

Date

Robert J. Adams & Associates Robert J. Adams & Associates 901 W. Jackson, Suite 202

Chicago, IL 60603

Phone: (312) 346-0100 / Fax: (312) 346-6228

Bar No. 0013056

/s/ Kyle Steele

Kyle Steele